

BEST AVAILABLE COPY

RECEIVED
CENTRAL FAX CENTER

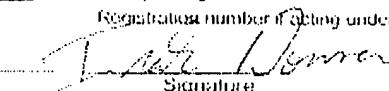
JAN 29 2007

CONTINUATION

Approved for use through 03/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
1100 L Street, N.W., Washington, D.C. 20591-0000

¹⁰Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810).)			Docket Number (Optional) 0113072 00135US1
Application Number	10/574,703-Cont. #2108	Filed	April 5, 2006
For SOFTWARE GENERATION METHOD			
Art Unit	N/A	Examiner	Not Yet Assigned
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below)			
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))		Fee	Small Entity Fee
		\$420	\$60
		\$450	\$225
		\$1020	\$510
		\$1590	\$795
		\$2160	\$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 <input type="checkbox"/> A check in the amount of the fee is enclosed <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>09-0210</u> I have enclosed a duplicate copy of this sheet			
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>36,120</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if filing under 37 CFR 1.34			
 Signature		<u>1/29/07</u> Date	
Irish H. Donnelly Typed or printed name		(212) 230-8800 Telephone Number	

02/01/2007 MKAYPAGH 00000091-10574703

01 FC:1252 450.00 DA